

<b>FEE TRANSMITTAL</b>		<b>Complete if Known</b>																																																																																																																																																																					
Patent fees are subject to annual revision <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/092,150																																																																																																																																																																				
		Filing Date	March 6, 2002																																																																																																																																																																				
		First Named Inventor	Miles R. Jackson																																																																																																																																																																				
		Examiner Name	Brian A. Zimmerman																																																																																																																																																																				
		Group Art Unit	2635																																																																																																																																																																				
TOTAL AMOUNT OF PAYMENT (\$)		1,184.00	IND10292 Technology Center 2600																																																																																																																																																																				
<b>METHOD OF PAYMENT (check all that apply)</b> <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 502117 Deposit Account Name: Motorola, Inc. This Director is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		<b>FEE CALCULATION (continued)</b> <b>3. ADDITIONAL FEES</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> </tr> <tr> <th>Code</th> <th>Fee (\$)</th> <th>Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late Provisional filing</td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td></tr> <tr><td>1812</td><td>2520</td><td>1812</td><td>2520</td><td>For filing a request for ex parte Reexamination</td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td></tr> <tr><td>1805</td><td>1840*</td><td>1805</td><td>1840*</td><td>Requesting publication of SIR after Examiner action</td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td></tr> <tr><td>1252</td><td>420</td><td>2252</td><td>210</td><td>Extension for reply within second month</td></tr> <tr><td>1253</td><td>950</td><td>2253</td><td>475</td><td>Extension for reply within third month</td></tr> <tr><td>1254</td><td>1480</td><td>2254</td><td>740</td><td>Extension for reply within fourth month</td></tr> <tr><td>1255</td><td>2010</td><td>2255</td><td>1005</td><td>Extension for reply within fifth month</td></tr> <tr><td>1401</td><td>330</td><td>2401</td><td>165</td><td>Notice of Appeal</td></tr> <tr><td>1402</td><td>330</td><td>2402</td><td>165</td><td>Filing a brief in support of an appeal</td></tr> <tr><td>1403</td><td>290</td><td>2403</td><td>145</td><td>Request for oral hearing</td></tr> <tr><td>1431</td><td>1510</td><td>1431</td><td>1510</td><td>Petition to institute a public use proceeding</td></tr> <tr><td>1432</td><td>110</td><td>2432</td><td>55</td><td>Petition to revive - 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<b>SUBMITTED BY</b> Name (Print/Type): Thomas V. Miller Signature: <i>[Signature]</i>		<b>Complete (if applicable)</b> Registration No.: 42,002 Telephone: (847)862-0153 Date: July 2, 2004																																																																																																																																																																					

BEST AVAILABLE COPY

&lt;Docket\_No&gt;

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10/092150

## CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	minus 20=	
INDEPENDENT CLAIMS	minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART I

	(Column 1)		(Column 2)		(Column 3)
AMENDMENT A	9/28/04		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR
					PRESENT EXTRA
	Total	23	Minus	20	= 3
	Independent	3	Minus	3	= 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>					

	(Column 1)		(Column 2)		(Column 3)
AMENDMENT B			CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR
					PRESENT EXTRA
	Total		Minus		
	Independent		Minus		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>					

	(Column 1)		(Column 2)		(Column 3)
AMENDMENT C			CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR
					PRESENT EXTRA
	Total		Minus		
	Independent		Minus		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>					

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
  - \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
  - \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1

## SMALL ENTITY

TYPE ☐ OR

## OTHER THAN SMALL ENTITY

RATE	FEE		RATE	FEE
BASIC FEE	385.00	OR	BASIC FEE	770.00
XS 9=		OR	XS18=	
X43=		OR	X86=	
+145=		OR	+290=	
TOTAL		OR	TOTAL	

## SMALL ENTITY

OR

## OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
XS 9=		OR	XS18=	54
<del>X43=</del>		OR	<del>X86=</del>	
+145=		OR	+290=	
TOTAL ADDIT FEE		OR	TOTAL ADDIT FEE	54.00

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
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